## Office of Administration

## Commissioner's Office

## "Request for Preauthorization for Other Services"

Program: <b>Alt</b> Contractor: <u>N</u> Subcontracto	ernatives to Abortion Jurses for Newborns r: N/A		
reem to be pur	pelow the information for each in rchased, cost for the item, and the rovided to be reimbursed.	item/service to be the justification. Ite	purchased. List the date of purchase, ems must be approved <b>before</b>
Client Name:		Date Enrolled: 8/1/16	
Proposed Purchase Date	Item	Total Cost (include formal estimate from provider of services)	Justification, include other sources of funding that have been attempted
	CAR ROPARS	590.80	NEEDS CAR REPAIRED SO CLIENT CAN WORK
AMOUNT TO	BE REIMBURSED	590.80	
Aaministratio	e faxed to 573/751-1212 or en ctor only!	e Capitol Building mailed to <u>emily.kr</u>	, Room, 125, Jefferson City, MO
Authorized per	rson requesting purchase:	MyR	
Approved for p	ourchase:	Date	
Purchase denied:Date			
Reason for denying purchase:			
		AND DESCRIPTION OF STREET AND ADDRESS OF THE PARTY OF THE	

Date: May 24 2/17 Francis B7-52 Per

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